STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

| I. Name of Lobby | vist(s) Jasmine Nears-Biesinger | | |
|---|---|---|--------------------------------------|
| II. Name of lobby | vist's partnership, firm or corporation, if a | ny: | |
| Everytown for G | un Safety Action Fund | | |
| | (Name of partnership, firm or corporation) | | •••• |
| PO Box 4184 | New York | NY | 10163 |
| Business Address: | (Street) (Town/City) | (State) | (Zip Code) |
| (646) 324-8250 | (917) 410-6932 | e-mail_lobbyreg@e | verytown.org |
| (Telephor | ne) (Fax) | | |
| | se transactions which are not attributable transactions occurring in the months prior to | | following client: |
| Everytown for G | iun Safety Action Fund | | |
| | (Full Name of Client as it appears on the Lo | bbyist Registration Form) | |
| <u>OR</u> | | | |
| All reportable tunrelated to any pa | transactions by the lobbyist (including the lob articular client. | byist's family), or the lobbying | firm listed below which a |
| IV. Date of Repo | | July 26, 2017 | |
| Reports cover: | activity from date of registration to 3/31/17 | activity from 4/1/17 to 6/30/17 | |
| | October 25, 2017 4 activity from 7/1/17 to 9/30/17 | January 31, 2018 [] activity from 10/1/17 to 12/31/1 | 77 |
| V. There have b If this box is check Concord, NH 0330 | peen no fees received and no reportable ked, complete just this form and submit it to the O1. | transactions made since the Secretary of State's Office, St | e last report. Vate House, Room 204, |
| VI. Check if addi | tional reports are attached: | | |
| | eeived fees or made expenditures, you must f | ile Addendum A – Fees and Ex | penses |
| If you have pa | aid an bonorarium or reimbursed expenses, yo | u must file Addendum B - Rep | ort of Honorariums or |
| | rm, or your family has made political contribu | utions, you must file Addendur | n C- Political Contribution |
| I bave read RSA 1 and complete to th | Affirmation by Lobbyist 15, RSA 15-B, RSA 14-C and RSA 664 and be best of thy knowledge and belief. | ereby swear or affirm that the form $\frac{7/25/201}{(Date)}$ | oregoing information is tr |
| (Signature of lobb Jasmine Nears-B | | (Date | ·/ |
| (Print Name of lo | | | |